

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)
The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2007
Open to Public Inspection

A For the 2007 calendar year, or tax year beginning , and ending

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Termination

☐ Amended return

☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions.

C Name of organization

LEHIGH COUNTY HUMANE SOCIETY

Number and street (or P O box if mail is not delivered to street address) Room/suite

640 DIXON STREET

City or town, state or country, and ZIP + 4

ALLENTOWN

PA 18103

D Employer identification number

23-1365372

E Telephone number

610-797-1205

F Accounting method: ☐ Cash

☒ Accrual ☐ Other (specify)

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ☐ Yes ☐ No

H(c) Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

I Group Exemption Number

M Check ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

G Website: **N/A**

J Organization type

(check only one) ☒ 501(c) (**3**) (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **1,881,833**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, grants, and similar amounts received

a Contributions to donor advised funds

b Direct public support (not included on line 1a)

c Indirect public support (not included on line 1a)

d Government contributions (grants) (not included on line 1a)

e Total (add lines 1a through 1d) (cash: \$ **289,914** noncash \$)

2 Program service revenue including government fees and contracts (from Part VII, line 93)

3 Membership dues and assessments

4 Interest on savings and temporary cash investments

5 Dividends and interest from securities

6a Gross rents

b Less rental expenses

c Net rental income or (loss) Subtract line 6b from line 6a

7 Other investment income (describe)

8a Gross amount from sales of assets other than inventory

b Less cost or other basis and sales expenses

c Gain or (loss) (attach schedule)

d Net gain or (loss) Combine line 8c, columns (A) and (B)

9 Special events and activities (attach schedule) If any amount is from gaming, check here ☐

a Gross revenue, (not including \$ of contributions reported on line 1b)

b Less direct expenses other than fundraising expenses

c Net income or (loss) from special events Subtract line 9b from line 9a

10a Gross sales of inventory, less returns and allowances

b Less cost of goods sold

c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a

11 Other revenue (from Part VII, line 103)

12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11

13 Program services (from line 44, column (B))

14 Management and general (from line 44, column (C))

15 Fundraising (from line 44, column (D))

16 Payments to affiliates (attach schedule)

17 Total expenses. Add lines 16 and 44, column (A)

18 Excess or (deficit) for the year Subtract line 17 from line 12

19 Net assets or fund balances at beginning of year (from line 73, column (A))

20 Other changes in net assets or fund balances (attach explanation)

21 Net assets or fund balances at end of year Combine lines 18, 19, and 20

1a

1b

1c

1d

1e **289,914**

2 **397,241**

3 **37,555**

4 **40,876**

5

6a

6b

6c

7

(A) Securities

(B) Other

8a **1,616,247**

8b **1,055,058**

8c **60,189**

8d **60,189**

9a

9b

9c

10a

10b

10c

11

12 **825,775**

13 **683,268**

14 **155,955**

15 **1,986**

16

17 **841,209**

18 **-15,434**

19 **2,943,314**

20 **3,222**

21 **2,931,102**

Revenue

Net Assets

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2007)

g.17 80

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

| Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I. | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
|---|------------|-----------|----------------------|----------------------------|-----------------|
| 22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/> | 22a | | | | |
| 22b Other grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/> | 22b | | | | |
| 23 Specific assistance to individuals (attach schedule) | 23 | | | | |
| 24 Benefits paid to or for members (attach schedule) | 24 | | | | |
| 25a Compensation of current officers, directors, key employees, etc. listed in Part V-A | 25a | | | | |
| b Compensation of former officers, directors, key employees, etc. listed in Part V-B | 25b | | | | |
| c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 25c | | | | |
| 26 Salaries and wages of employees not included on lines 25a, b, and c | 26 | 325,613 | 269,347 | 56,266 | |
| 27 Pension plan contributions not included on lines 25a, b, and c | 27 | | | | |
| 28 Employee benefits not included on lines 25a - 27 | 28 | 28,220 | 20,883 | 7,337 | |
| 29 Payroll taxes | 29 | 30,513 | 22,580 | 7,933 | |
| 30 Professional fundraising fees | 30 | | | | |
| 31 Accounting fees | 31 | 7,063 | | 7,063 | |
| 32 Legal fees | 32 | | | | |
| 33 Supplies | 33 | 10,332 | 10,332 | | |
| 34 Telephone | 34 | 9,918 | 8,430 | 1,488 | |
| 35 Postage and shipping | 35 | 8,432 | 7,167 | 1,265 | |
| 36 Occupancy | 36 | 48,811 | 41,739 | 7,072 | |
| 37 Equipment rental and maintenance | 37 | | | | |
| 38 Printing and publications | 38 | 23,426 | 19,912 | 3,514 | |
| 39 Travel | 39 | | | | |
| 40 Conferences, conventions, and meetings | 40 | 4,366 | | 4,366 | |
| 41 Interest | 41 | | | | |
| 42 Depreciation, depletion, etc. (attach schedule) | 42 | 47,128 | 40,923 | 6,205 | |
| 43 Other expenses not covered above (itemize) | | | | | |
| a SEE STATEMENT 4 | 43a | 297,387 | 241,955 | 53,446 | 1,986 |
| b | 43b | | | | |
| c | 43c | | | | |
| d | 43d | | | | |
| e | 43e | | | | |
| f | 43f | | | | |
| g | 43g | | | | |
| 44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) | 44 | 841,209 | 683,268 | 155,955 | 1,986 |

Joint Costs. Check ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose?

► **SEE STATEMENT 5**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses

(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a CRUELTY INVESTIGATION; TEMPORARY CARE AND HOUSING OF STRAY AND UNWANTED ANIMALS; ANIMAL ADOPTION AND EUTHENASIA SERVICES.

(Grants and allocations \$)

If this amount includes foreign grants, check here ► ☐

642,345

b

(Grants and allocations \$)

If this amount includes foreign grants, check here ► ☐

c

(Grants and allocations \$)

If this amount includes foreign grants, check here ► ☐

d

(Grants and allocations \$)

If this amount includes foreign grants, check here ► ☐

e Other program services (attach schedule) SEE STMT 6

(Grants and allocations \$)

If this amount includes foreign grants, check here ► ☐

40,923

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

683,268

Form **990** (2007)

Part IV Balance Sheets (See the instructions.)

| | | (A) Beginning of year | (B) End of year |
|---|---|--------------------------|--------------------|
| Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only | | | |
| Assets | 45 Cash—non-interest-bearing | 35,173 | 45 19,771 |
| | 46 Savings and temporary cash investments | 8,469 | 46 40,592 |
| | 47a Accounts receivable | 47a | |
| | b Less allowance for doubtful accounts | 47b | 47c |
| | 48a Pledges receivable | 48a | |
| | b Less allowance for doubtful accounts | 48b | 48c |
| | 49 Grants receivable | | 49 |
| | 50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) | | 50a |
| | b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att schedule) | | 50b |
| | 51a Other notes and loans receivable (attach schedule) | 51a | |
| | b Less allowance for doubtful accounts | 51b | 51c |
| | 52 Inventories for sale or use | | 52 |
| | 53 Prepaid expenses and deferred charges | | 53 |
| | 54a Investments—publicly-traded securities SEE STATEMENT 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV | 1,748,329 | 54a 1,783,151 |
| | b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV | | 54b |
| 55a Investments—land, buildings, and equipment basis | 55a | | |
| b Less accumulated depreciation (attach schedule) | 55b | 55c | |
| 56 Investments—other (attach schedule) | | 56 | |
| 57a Land, buildings, and equipment basis | 57a 1,678,481 | | |
| b Less accumulated depreciation (attach schedule) SEE STATEMENT 8 | 57b 545,672 | 1,170,610 57c 1,132,809 | |
| 58 Other assets, including program-related investments (describe ►) | | 58 | |
| 59 Total assets (must equal line 74) Add lines 45 through 58 | 2,962,581 | 59 2,976,323 | |
| Liabilities | 60 Accounts payable and accrued expenses | 19,267 | 60 45,221 |
| | 61 Grants payable | | 61 |
| | 62 Deferred revenue | | 62 |
| | 63 Loans from officers, directors, trustees, and key employees (attach schedule) | | 63 |
| | 64a Tax-exempt bond liabilities (attach schedule) | | 64a |
| | b Mortgages and other notes payable (attach schedule) | | 64b |
| | 65 Other liabilities (describe ►) | | 65 |
| | 66 Total liabilities. Add lines 60 through 65 | 19,267 | 66 45,221 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74 | | |
| | 67 Unrestricted | 2,943,314 | 67 2,931,102 |
| | 68 Temporarily restricted | | 68 |
| | 69 Permanently restricted | | 69 |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74 | | |
| | 70 Capital stock, trust principal, or current funds | | 70 |
| | 71 Paid-in or capital surplus, or land, building, and equipment fund | | 71 |
| | 72 Retained earnings, endowment, accumulated income, or other funds | | 72 |
| 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21) | 2,943,314 | 73 2,931,102 | |
| 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 | 2,962,581 | 74 2,976,323 | |

Part IV-A

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

| | | | | |
|----------|--|-----------|----------|----------------|
| a | Total revenue, gains, and other support per audited financial statements | | a | 825,775 |
| b | Amounts included on line a but not on Part I, line 12 | | | |
| 1 | Net unrealized gains on investments | b1 | | |
| 2 | Donated services and use of facilities | b2 | | |
| 3 | Recoveries of prior year grants | b3 | | |
| 4 | Other (specify) | b4 | | |
| | Add lines b1 through b4 | | b | |
| c | Subtract line b from line a | | c | 825,775 |
| d | Amounts included on Part I, line 12, but not on line a : | | | |
| 1 | Investment expenses not included on Part I, line 6b | d1 | | |
| 2 | Other (specify) | d2 | | |
| | Add lines d1 and d2 | | d | |
| e | Total revenue (Part I, line 12) Add lines c and d | | e | 825,775 |

Part IV-B

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | | |
|----------|---|-----------|----------|---------|
| a | Total expenses and losses per audited financial statements | | a | 841,206 |
| b | Amounts included on line a but not Part I, line 17 | | | |
| 1 | Donated services and use of facilities | b1 | | |
| 2 | Prior year adjustments reported on Part I, line 20 | b2 | | |
| 3 | Losses reported on Part I, line 20 | b3 | | |
| 4 | Other (specify) | b4 | | |
| | Add lines b1 through b4 | | b | |
| c | Subtract line b from line a | | c | 841,206 |
| d | Amounts included on Part I, line 17, but not on line a : | | | |
| 1 | Investment expenses not included on Part I, line 6b | d1 | | |
| 2 | Other (specify) | d2 | | |
| | SEE STATEMENT 9 | 3 | d | 3 |
| | Add lines d1 and d2 | | e | 841,209 |
| e | Total expenses (Part I, line 17) Add lines c and d | | | |

Part V-A

Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

[illegible]

| Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) | | Yes | No |
|--|--|------------|----------|
| 75a | Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings | | |
| b | Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) | 75b | X |
| c | Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" | 75c | X |
| d | Does the organization have a written conflict of interest policy? | 75d | X |

| Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) | | | | |
|---|------------------------|---|--|--|
| (A) Name and address | (B) Loans and Advances | (C) Compensation (if not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation plans | (E) Expense account and other allowances |
| N/A | | | | |
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| Part VI Other Information (See the instructions) | | Yes | No |
|---|---|------------|----------|
| 76 | Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change | 76 | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes | 77 | X |
| 78a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 78a | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 78b | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement | 79 | X |
| 80a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? | 80a | X |
| b | If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt | | |
| 81a | Enter direct and indirect political expenditures (See line 81 instructions) | 81a | 0 |
| b | Did the organization file Form 1120-POL for this year? | 81b | X |

Part VI Other Information (continued)

| | | Yes | No |
|------------|---|--|-----------|
| 82a | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? | | X |
| b | If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III) | | |
| 82b | | | |
| 83a | Did the organization comply with the public inspection requirements for returns and exemption applications? | X | |
| b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | | |
| 83b | | | |
| 84a | Did the organization solicit any contributions or gifts that were not tax deductible? | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | |
| 84b | | | |
| 85a | 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? | | |
| b | Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. | | |
| 85c | | | |
| 85d | | | |
| 85e | | | |
| 85f | | | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | | |
| 85g | | | |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? | | |
| 85h | | | |
| 86 | 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 | | |
| 86a | | | |
| b | Gross receipts, included on line 12, for public use of club facilities | | |
| 86b | | | |
| 87 | 501(c)(12) orgs. Enter a Gross income from members or shareholders | | |
| 87a | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | | |
| 87b | | | |
| 88a | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX | | X |
| b | At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI | | X |
| 88b | | | |
| 89a | 501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 0 , section 4912 0 , section 4955 0 | | |
| b | 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction | | X |
| 89b | | | |
| c | Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0 | | |
| d | Enter Amount of tax on line 89c, above, reimbursed by the organization 0 | | |
| e | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? | | X |
| 89e | | | |
| f | All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? | | X |
| 89f | | | |
| g | For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | X |
| 89g | | | |
| 90a | List the states with which a copy of this return is filed PA | | |
| b | Number of employees employed in the pay period that includes March 12, 2007 (See instructions) | 90b | 23 |
| 91a | The books are in care of BRUCE FRITCH 640 DIXON STREET Located at ALLENTOWN, PA | Telephone no 610-797-1205 ZIP + 4 18103 | |
| b | At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts | 91b | X |

| | |
|-----|----|
| Yes | No |
|-----|----|

| | |
|-----|---|
| 91c | X |
|-----|---|

▶

92

(E)
Related or
exempt function
income

397,241

37,555

40,876

60,189

| | | |
|---|---|---------|
| 0 | 0 | 535,861 |
|---|---|---------|

535,861

(E)
End-of-year
assets

%

%

%

| | % |
|----|---|
| 10 | |

| | | | |
|--|-----|----------|----|
| | Yes | X | No |
|--|-----|----------|----|

☐ Yes ☒ No

Form **990** (2007)

Part XI

Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

- 106** Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

| Yes | No |
|-----|----------|
| | X |

| | (A) Name, address, of each controlled entity | (B) Employer ID Number | (C) Description of transfer | (D) Amount of transfer |
|---|--|------------------------------|-----------------------------------|---------------------------|
| a | | | | |
| b | | | | |
| c | | | | |
| | Totals | | | |

- 107** Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

| Yes | No |
|-----|----------|
| | X |

| | (A) Name, address, of each controlled entity | (B) Employer ID Number | (C) Description of transfer | (D) Amount of transfer |
|---|--|------------------------------|-----------------------------------|---------------------------|
| a | | | | |
| b | | | | |
| c | | | | |
| | Totals | | | |

- 108** Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

| Yes | No |
|-----|----|
| | |

**Please
Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: Karl Kercher Date: 11/10/08
Type or print name and title: KARL KERCHER - RECORDING SECRETARY

**Paid
Preparer's
Use Only**

Preparer's signature: Michael F. Homa, CPA Date: 10/10/08 Check if self-employed: ☐
Firm's name (or yours if self-employed), address, and ZIP + 4: MICHAEL F. HOMA & COMPANY, P.C.
1631 MAIN ST FL 2
HELLERTOWN, PA 18055
Preparer's SSN or PTIN (See Gen Instr X): P00118544
EIN: 26-1559147
Phone no: 484-852-0034

SCHEDULE A
(Form 990 or 990-EZ)**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2007Department of the Treasury
Internal Revenue Service**Supplementary Information-(See separate instructions.)**
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

LEHIGH COUNTY HUMANE SOCIETY

Employer identification number

23-1365372**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 1 of the instructions. List each one. If there are none, enter "None.")

| (a) Name and address of each employee paid more than \$50,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to empl benefit plans & deferred comp | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 ▶ | | | | |

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services ▶ | | |

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| Total number of other contractors receiving over \$50,000 for other services ▶ | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

- 1** During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ 0 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

- 2** During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a** Sale, exchange, or leasing of property?
- b** Lending of money or other extension of credit?
- c** Furnishing of goods, services, or facilities?
- d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
- e** Transfer of any part of its income or assets?

2a X

2b X

2c X

2d X

2e X

- 3a** Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a X

- b** Did the organization have a section 403(b) annuity plan for its employees?

3b X

- c** Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c X

- d** Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d X

- 4a** Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a X

- b** Did the organization make any taxable distributions under section 4966?

4b

- c** Did the organization make a distribution to a donor, donor advisor, or related person?

4c

- d** Enter the total number of donor advised funds owned at the end of the tax year ► _____

- e** Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____

- f** Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► 0

- g** Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► 0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 ☐ A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ►
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
- ☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

| (a) Name(s) of supported organization(s) | (b) Employer identification number (EIN) | (c) Type of organization (described in lines 5 through 12 above or IRC section) | (d) Is the supported organization listed in the supporting organization's governing documents? | | (e) Amount of support |
|---|---|---|---|----|-----------------------------|
| | | | Yes | No | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total ► | | | | | |

- 14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

| Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2005 | (c) 2004 | (d) 2003 | (e) Total |
|---|----------|-----------|----------|-----------|-----------|
| 15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.) | 210,001 | 707,435 | 264,718 | 983,020 | 2,165,174 |
| 16 Membership fees received | 30,977 | 27,940 | 27,500 | 31,425 | 117,842 |
| 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose | 420,731 | 344,953 | 274,906 | 317,298 | 1,357,888 |
| 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 | 38,349 | 27,609 | 26,218 | 12,016 | 104,192 |
| 19 Net income from unrelated business activities not included in line 18 | | | | | 0 |
| 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | 0 |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. | | | | | 0 |
| 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. | | | | | 0 |
| 23 Total of lines 15 through 22 | 700,058 | 1,107,937 | 593,342 | 1,343,759 | 3,745,096 |
| 24 Line 23 minus line 17 | 279,327 | 762,984 | 318,436 | 1,026,461 | 2,387,208 |
| 25 Enter 1% of line 23 | 7,001 | 11,079 | 5,933 | 13,438 | |

| | | |
|--|-----|-----------|
| 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 | 26a | 47,744 |
| b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts | 26b | |
| c Total support for section 509(a)(1) test. Enter line 24, column (e) | 26c | 2,387,208 |
| d Add Amounts from column (e) for lines 18 <u>104,192</u> 19 _____ 22 _____ 26b _____ | 26d | 104,192 |
| e Public support (line 26c minus line 26d total) | 26e | 2,283,016 |
| f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) | 26f | 95.6354 % |

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year

N/A

(2006) (2005) (2004) (2003)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year

N/A

(2006) (2005) (2004) (2003)

c Add Amounts from column (e) for lines 15 _____ 16 _____
17 _____ 20 _____ 21 _____

d Add Line 27a total _____ and line 27b total _____

e Public support (line 27c total minus line 27d total)

f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) **27f** _____

g Public support percentage (line 27e (numerator) divided by line 27f (denominator))

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 9 of the instructions.)(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

| | N/A | Yes | No |
|--|------------|-----|----|
| 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | 29 | | |
| 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | 30 | | |
| 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) | 31 | | |
| 32 Does the organization maintain the following | | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | 32a | | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | 32b | | |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | 32c | | |
| d Copies of all material used by the organization or on its behalf to solicit contributions? | 32d | | |
| If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) | | | |
| 33 Does the organization discriminate by race in any way with respect to | | | |
| a Students' rights or privileges? | 33a | | |
| b Admissions policies? | 33b | | |
| c Employment of faculty or administrative staff? | 33c | | |
| d Scholarships or other financial assistance? | 33d | | |
| e Educational policies? | 33e | | |
| f Use of facilities? | 33f | | |
| g Athletic programs? | 33g | | |
| h Other extracurricular activities? | 33h | | |
| If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) | | | |
| 34a Does the organization receive any financial aid or assistance from a governmental agency? | 34a | | |
| b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement | 34b | | |
| 35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation | 35 | | |

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**

| | | | |
|----------------|--|----------------|---|
| Check a | if the organization belongs to an affiliated group | Check b | if you checked "a" and "limited control" provisions apply |
|----------------|--|----------------|---|

| Limits on Lobbying Expenditures | (a) Affiliated group totals | (b) To be completed for all electing organizations | | |
|---|--|--|-----------|--|
| (The term "expenditures" means amounts paid or incurred) | | | | |
| 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) | 36 | | | |
| 37 Total lobbying expenditures to influence a legislative body (direct lobbying) | 37 | | | |
| 38 Total lobbying expenditures (add lines 36 and 37) | 38 | | | |
| 39 Other exempt purpose expenditures | 39 | | | |
| 40 Total exempt purpose expenditures (add lines 38 and 39) | 40 | | | |
| 41 Lobbying nontaxable amount Enter the amount from the following table- | | | | |
| <table style="width:100%; border: none;"> <tr> <td style="width:50%; vertical-align: top;"> If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 </td> <td style="width:50%; vertical-align: top;"> The lobbying nontaxable amount is- 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000 </td> </tr> </table> | If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 | The lobbying nontaxable amount is- 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000 | 41 | |
| If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 | The lobbying nontaxable amount is- 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000 | | | |
| 42 Grassroots nontaxable amount (enter 25% of line 41) | 42 | | | |
| 43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 | 43 | | | |
| 44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 | 44 | | | |

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below

See the instructions for lines 45 through 50 on page 13 of the instructions)

| Calendar year (or fiscal year beginning in) ▶ | Lobbying Expenditures During 4-Year Averaging Period | | | | |
|---|--|-------------|-------------|-------------|--------------|
| | (a) 2007 | (b) 2006 | (c) 2005 | (d) 2004 | (e) Total |
| 45 Lobbying nontaxable amount | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | |
| 47 Total lobbying expenditures | | | | | |
| 48 Grassroots nontaxable amount | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | |
| 50 Grassroots lobbying expenditures | | | | | |

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

| Yes | No | Amount |
|----------|----------|--------|
| X | | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |

SEE STATEMENT 11

Schedule A (Form 990 or 990-EZ) 2007

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a** Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash

- (ii) Other assets**

- b Other transactions**

- (i) Sales or exchanges of assets with a noncharitable exempt organization

- (ii) Purchases of assets from a noncharitable exempt organization

- (iii) Rental of facilities, equipment, or other assets

- (iv) Reimbursement arrangements**

- (v) Loans or loan quarantees**

- (vi) Performance of services or membership or fundraising solicitations

- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

| | Yes | No |
|--------|-----|----|
| 51a(i) | | X |
| a(ii) | | X |
| b(i) | | X |
| b(ii) | | X |
| b(iii) | | X |
| b(iv) | | X |
| b(v) | | X |
| b(vi) | | X |
| c | | X |

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

[illegible]

Form **4562**
Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2007Attachment
Sequence No **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

LEHIGH COUNTY HUMANE SOCIETY

Identifying number

23-1365372

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179****Note: If you have any listed property, complete Part V before you complete Part I.**

| | | | |
|------------------------------------|--|-------------------------------------|-------------------------|
| 1 | Maximum amount See the instructions for a higher limit for certain businesses | 1 | 125,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation | 3 | 500,000 |
| 4 | Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions | 5 | |
| (a) Description of property | | (b) Cost (business use only) | (c) Elected cost |
| 6 | | | |
| 7 | Listed property Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction Enter the smaller of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2006 Form 4562 | 10 | |
| 11 | Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) | 11 | |
| 12 | Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 | 12 | |
| 13 | Carryover of disallowed deduction to 2008 Add lines 9 and 10, less line 12 | 13 | |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

| | | | |
|-----------|--|-----------|---------------|
| 14 | Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions) | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | 47,128 |

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

| | | | |
|-----------|--|-----------|----------|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2007 | 17 | 0 |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> | | |

Section B-Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only-see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|---------------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property | | | | | | |
| b 5-year property | | | | | | |
| c 7-year property | | | | | | |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs | | S/L | |
| h Residential rental property | | | 27 5 yrs | MM | S/L | |
| | | | 27 5 yrs | MM | S/L | |
| i Nonresidential real property | | | 39 yrs | MM | S/L | |
| | | | | MM | S/L | |

Section C-Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|-----------------------|--|--|--------|----|-----|--|
| 20a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs | | S/L | |
| c 40-year | | | 40 yrs | MM | S/L | |

Part IV Summary (see instructions)

| | | | |
|-----------|---|-----------|---------------|
| 21 | Listed property Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr | 22 | 47,128 |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2007)

DAA

THERE ARE NO AMOUNTS FOR PAGE 2

23-1365372

Federal Statements

FYE: 12/31/2007

Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

| <u>Description</u> | <u>Amount</u> |
|--------------------|------------------|
| | <u>\$ 37,555</u> |
| TOTAL | <u>\$ 37,555</u> |

Federal Statements

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

| Desc | | Whom Sold | Date Acquired | Date Sold | Sale Price | Cost & Expense | Depr | Gain/ -Loss |
|----------------------------|--|--------------|------------------|--------------|---------------|-------------------|------|----------------|
| How Rec'd | | | | | | | | |
| PUBLICLY TRADED SECURITIES | | | | | | | | |
| | | | | | \$1,116,247 | \$1,056,058 | \$ | 60,189 |
| | | | | | \$1,116,247 | \$1,056,058 | \$ | 60,189 |
| TOTAL | | | | | | | | |

23-1365372

Federal Statements

FYE: 12/31/2007

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

| <u>Description</u> | <u>Amount</u> |
|--|-----------------|
| BOOK / TAX DEPREC DIFFERENCE | \$ 3 |
| UNREALIZED GAIN ON MARKETABLE SECURITIES | 3,219 |
| ROUNDING | |
| TOTAL | <u>\$ 3,222</u> |

23-1365372

Federal Statements

FYE: 12/31/2007

Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses

| Description | Total Expenses | Program Service | Mgt & General | Fund- Raising |
|--------------------------|-------------------|--------------------|------------------|------------------|
| EXPENSES | \$ | \$ | \$ | \$ |
| OFFICE EXPENSES | 4,899 | 4,164 | 735 | |
| DUES AND SUBSCRIPTIONS | 416 | | 416 | |
| TRASH REMOVAL | 5,076 | 4,315 | 761 | |
| INSURANCE | 16,467 | 13,997 | 2,470 | |
| GAS | 4,065 | 4,065 | | |
| ADVERTISING | 2,923 | | 2,923 | |
| MISCELLANEOUS | 18,790 | | 18,790 | |
| UNIFORMS | 7,877 | 7,877 | | |
| DRUGS | 23,492 | 23,492 | | |
| FOOD | 6,228 | 6,228 | | |
| BOXES & CASKET EXP | 878 | 878 | | |
| MARKERS EXP | 2,163 | 2,163 | | |
| RENDERING AND DISPOSAL | 20,518 | 20,518 | | |
| EMPLOYEE VACCINATIONS | 105 | 105 | | |
| LICENSE & FEES | 18,984 | 18,984 | | |
| VETERINARIAN SERVICES | 131,874 | 131,874 | | |
| FUND RAISING EXPENSES | 1,986 | | | 1,986 |
| INVESTMENT ADVISORY FEES | 27,351 | | 27,351 | |
| VEHICLE MAINTENANCE | 3,295 | 3,295 | | |
| TOTAL | \$ 297,387 | \$ 241,955 | \$ 53,446 | \$ 1,986 |

23-1365372

Federal Statements

FYE: 12/31/2007

Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

Description

THE PURPOSE OF THE LEHIGH COUNTY HUMANE SOCIETY IS THE PREVENTION OF CRUELTY TO ANIMALS; THE RELIEF OF SUFFERING AMONG ANIMALS; AND THE EXTENSION OF HUMANE EDUCATION. THE ORGANIZATION PROVIDES HUMANE CARE AND TREATMENT FOR ALL ANIMALS WHICH NEED PROTECTION IN THE AREA SERVED BY THE SOCIETY; SEEKS TO RETURN LOST ANIMALS TO THEIR OWNERS; SEEKS SUITABLE HOMES FOR ANIMALS WITHOUT OWNERS; AND PROVIDES EUTHENASIA WHEN NECESSARY.

Statement 6 - Form 990, Part III, Line e - Other Program Services

Description

ALL OTHER ACHIEVEMENTS

23-1365372

Federal Statements

FYE: 12/31/2007

Statement 7 - Form 990, Part IV, Line 54a - Publicly Traded Securities

| <u>Description</u> | <u>Beginning of Year</u> | <u>End of Year</u> | <u>Basis of Valuation</u> |
|-------------------------|------------------------------|------------------------|-------------------------------|
| US AND STATE GOVERNMENT | \$ 548,329 | \$ 547,411 | MARKET |
| CORPORATE STOCK | 1,200,000 | 1,235,740 | MARKET |
| TOTAL | <u>\$ 1,748,329</u> | <u>\$ 1,783,151</u> | |

Statement 8 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

| <u>Description</u> | <u>Beginning of Year</u> | <u>Accum Depr</u> | <u>End of Year</u> | <u>Accum Depr</u> |
|--------------------|------------------------------|-----------------------|------------------------|-----------------------|
| | \$ 1,666,306 | \$ 498,546 | \$ 1,675,631 | \$ 545,672 |
| | 2,850 | | 2,850 | |
| TOTAL | <u>\$ 1,669,156</u> | <u>\$ 498,546</u> | <u>\$ 1,678,481</u> | <u>\$ 545,672</u> |

23-1365372

Federal Statements

FYE: 12/31/2007

Statement 9 - Form 990, Part IV-B - Other Expenses included on Return

| Description | Amount |
|------------------------------|--------|
| ADVISORY FEES | \$ |
| ROUNDING | |
| BOOK / TAX DEPREC DIFFERENCE | 3 |
| TOTAL | \$ 3 |

Federal Statements

11/10/2008 12:46 PM

Statement 10 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

| Name and Address | Title | Average Hours | Compensation | Benefits | Expenses |
|--|--------------|---------------|--------------|----------|----------|
| BRUCE FRITCH ALLENTOWN PA | PRESIDENT | 0 | 0 | 0 | 0 |
| JOHN R. K. SOLT ALLENTOWN PA | VICE PRES. | 0 | 0 | 0 | 0 |
| DIANE JONES ALLENTOWN PA | TREASURER | 0 | 0 | 0 | 0 |
| KARL KERCHER ALLENTOWN PA | RECORDING SE | 0 | 0 | 0 | 0 |
| CONNIE FRITCH ALLENTOWN PA | CON EDUCATIO | 0 | 0 | 0 | 0 |
| MARY AMELIO ALLENTOWN PA | BOARD | 0 | 0 | 0 | 0 |
| BRUCE PUTCHAT QUAKERTOWN PA | BOARD | 0 | 0 | 0 | 0 |
| MARY ANN SARSON-SHAFFER CATASQUA PA | BOARD | 0 | 0 | 0 | 0 |
| CAROLYN CONSTANTINE ALBURTIS PA | BOARD | 0 | 0 | 0 | 0 |
| MARIAN HUMMEL BETHLEHEM PA | BOARD | 0 | 0 | 0 | 0 |
| NICK KORDOPATIS ALLENTOWN PA | BOARD | 0 | 0 | 0 | 0 |
| ALICE ZUANET ALLENTOWN PA | EXECUTIVE DI | 0 | 0 | 0 | 0 |

Federal Statements**Statement 10 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)**

| Name and Address | Title | Average Hours | Compensation | Benefits | Expenses |
|----------------------------------|--------------|---------------|--------------|----------|----------|
| ORLANDO AQUIRRE ALLENTOWN PA | HUMAN OFFICE | 0 | 0 | 0 | 0 |
| KELLY ADAM ALLENTOWN PA | KENNEL SUPER | 0 | 0 | 0 | 0 |
| EILEEN BURKHARDT ALLENTOWN PA | SR. OFFICER | 0 | 0 | 0 | 0 |
| LOUETTE KRUEGER ALLENTOWN PA | BOOKKEEPER | 0 | 0 | 0 | 0 |

Statement 11 - Schedule A, Part VI-B - Description of Lobbying Activities**Description**

THE LEHIGH COUNTY HUMANE SOCIETY EXISTS TO PROMOTE THE HUMANE TREATMENT OF ALL ANIMALS. ALTHOUGH NO SPECIFIC MONIES ARE SPENT ON OR ANY SPECIFIC PERSON EMPLOYED TO INFLUENCE LEGISLATION, THE SOCIETY DOES AND WILL SUPPORT ANY LEGISLATION THAT MAY ADVANCE THIS PHILOSOPHY. THE SOCIETY EXISTS FOR THE TEMPORARY CARE OF STRAY, UNWANTED ANIMALS AND EUTHANASIA SERVICES. ALSO THE EDUCATION OF THE PUBLIC FOR THE PROPER CARE AND HANDLING OF ANIMALS. SUPPORTING OR CHANGING LEGISLATION IS AN INCIDENTAL FUNCTION.

LEHIGH COUNTY HUMANE SOCIETY

FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2007 AND 2006

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Michael F. Homa & Company, P.C.

A Certified Public
Accounting Firm

Member AICPA | PICPA | AICPA Division of CPA Firms | Private Companies Practice Section

To the Board of Directors of
Lehigh County Humane Society
Allentown, Pennsylvania

We have audited the accompanying statements of financial position of the Lehigh County Humane Society (a nonprofit organization) as of December 31, 2007 and 2006 and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Lehigh County Humane Society as of December 31, 2007 and 2006 and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Michael F. Homa & Company, P.C.

Hellertown, Pennsylvania
November 10, 2008

**LEHIGH COUNTY HUMANE SOCIETY
STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2007 AND 2006**

| | <u>2007</u> | <u>2006</u> |
|--|----------------------------|----------------------------|
| ASSETS | | |
| CURRENT ASSETS | | |
| Cash | \$ 60,363 | \$ 43,643 |
| Marketable securities and government bonds | <u>1,783,151</u> | <u>1,748,329</u> |
| Total Current Assets | 1,843,514 | 1,791,972 |
| PROPERTY AND EQUIPMENT | | |
| Land | 2,850 | 2,850 |
| Buildings | 1,501,395 | 1,492,505 |
| Transportation | 60,301 | 60,301 |
| Equipment | <u>113,935</u> | <u>113,500</u> |
| | 1,678,481 | 1,669,156 |
| Less: accumulated depreciation | <u>545,672</u> | <u>498,546</u> |
| Net Property and Equipment | <u>1,132,809</u> | <u>1,170,610</u> |
| TOTAL ASSETS | \$ <u>2,976,323</u> | \$ <u>2,962,582</u> |
| LIABILITIES AND NET ASSETS | | |
| CURRENT LIABILITIES | | |
| Accounts payable | \$ 40,448 | \$ 13,014 |
| Accrued payroll | <u>4,773</u> | <u>6,253</u> |
| Total Current Liabilities | 45,221 | 19,267 |
| NET ASSETS | | |
| Unrestricted | <u>2,931,102</u> | <u>2,943,315</u> |
| Total Net Assets | <u>2,931,102</u> | <u>2,943,315</u> |
| TOTAL LIABILITIES AND NET ASSETS | \$ <u>2,976,323</u> | \$ <u>2,962,582</u> |

**LEHIGH COUNTY HUMANE SOCIETY
STATEMENTS OF ACTIVITIES
FOR THE YEARS ENDED DECEMBER 31, 2007 AND 2006**

| | <u>2007</u> | <u>2006</u> |
|---|----------------------------|----------------------------|
| UNRESTRICTED NET ASSETS | | |
| Public Support | | |
| Grants and gifts | \$ 147,797 | \$ 110,444 |
| Bequests | <u>142,117</u> | <u>99,557</u> |
| | 289,914 | 210,001 |
| Other Revenue | | |
| Program revenue | 397,241 | 420,731 |
| Investment return | 76,934 | 140,195 |
| Membership dues | <u>37,555</u> | <u>30,977</u> |
| | 511,730 | 591,903 |
| Net assets released from restrictions | | |
| Satisfaction of program restrictions | <u>-</u> | <u>90,307</u> |
| TOTAL SUPPORT AND REVENUE | 801,644 | 892,211 |
| Expenses | | |
| Program services | 684,390 | 602,753 |
| Management and general expenses | <u>129,468</u> | <u>138,357</u> |
| | 813,858 | 741,110 |
| (DECREASE) INCREASE IN UNRESTRICTED NET ASSETS | (12,214) | 151,101 |
| TEMPORARILY RESTRICTED NET ASSETS | | |
| Bequests - restricted | 2,500 | - |
| Net assets released from restrictions | | |
| Satisfaction of program restrictions | <u>(2,500)</u> | <u>(90,307)</u> |
| DECREASE IN TEMPORARILY RESTRICTED NET ASSETS | <u>-</u> | <u>(90,307)</u> |
| (DECREASE) INCREASE IN NET ASSETS | (12,214) | 60,794 |
| NET ASSETS, BEGINNING OF YEAR | <u>2,943,315</u> | <u>2,882,520</u> |
| NET ASSETS, END OF YEAR | \$ <u><u>2,931,102</u></u> | \$ <u><u>2,943,315</u></u> |

**LEHIGH COUNTY HUMANE SOCIETY
STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2007 AND 2006**

| | <u>2007</u> | <u>2006</u> |
|---|------------------|------------------|
| CASH FLOWS FROM OPERATING ACTIVITIES: | | |
| Increase (decrease) in net assets | \$ (12,214) | \$ 60,794 |
| Adjustments to reconcile change in net assets to net cash provided by operating activities | | |
| Depreciation | 47,126 | 46,954 |
| Unrealized gain on marketable securities | (3,219) | (107,680) |
| (Gain) Loss on sale of marketable securities | (60,190) | (22,752) |
| Increase (Decrease) in operating liabilities | | |
| Accounts payable | 27,434 | (3,807) |
| Accrued payroll | (1,480) | 2,443 |
| | <u>(2,543)</u> | <u>(24,048)</u> |
| NET CASH USED BY OPERATING ACTIVITIES | <u>(2,543)</u> | <u>(24,048)</u> |
| CASH FLOWS FROM INVESTING ACTIVITIES: | | |
| Purchases of marketable securities | (1,087,659) | (596,722) |
| Proceeds from sales of marketable securities | 1,116,247 | 588,593 |
| Payments for buildings and equipment | (9,325) | (21,076) |
| | <u>19,263</u> | <u>(29,205)</u> |
| NET CASH PROVIDED (USED) IN INVESTING ACTIVITIES | <u>19,263</u> | <u>(29,205)</u> |
| NET INCREASE (DECREASE) IN CASH | 16,720 | (53,253) |
| CASH, BEGINNING OF YEAR | <u>43,643</u> | <u>96,895</u> |
| CASH, END OF YEAR | <u>\$ 60,363</u> | <u>\$ 43,643</u> |

**LEHIGH COUNTY HUMANE SOCIETY
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2007 AND 2006**

NOTE 1 - NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

The Organization provides adoption services, temporary shelter, educational programs, prevention of cruelty to animals, and low cost spaying and neutering services to Lehigh County. The Organization is primarily supported through donor contributions, support from municipalities and fees for services performed.

Accounting Policies

Assets and liabilities and revenue and expenses are recognized using the accrual basis of accounting.

Operating accounts of the Society are maintained on a basis similar to the principles of "fund accounting." This is the procedure by which the Society establishes separate operating funds for accounting and reporting purposes that are in accordance with activities or objectives as specified by the Board. There are separate accounts maintained for each fund; however, in the accompanying financial statements they have been combined to conform with SFAS No. 117.

Net assets restricted by outside sources are so indicated and are distinguished from unrestricted net assets allocated to specific purposes by action of the governing board. Externally restricted assets may only be utilized in accordance with the purposes established by the source of such assets and are in contrast with unrestricted assets over which the governing board retains full control to use in achieving any of its purposes.

All gains and losses arising from the sale, collection or other disposition of investments and other noncash assets are accounted for in the fund which owned such assets. Ordinary income derived from investment income is accounted for in the fund owning such assets, except for income derived from investments of endowment and similar funds, which income is accounted for in the fund to which it is restricted or, if unrestricted, as revenues in unrestricted current funds.

All other unrestricted revenue is accounted for in the unrestricted current fund. Restricted gifts, grants, appropriations, endowment income, and other restricted resources are accounted for in the appropriate restricted funds. Restricted current funds are reported as revenues and expenditures when expended for current operating purposes.

**LEHIGH COUNTY HUMANE SOCIETY
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2007 AND 2006**

NOTE 1 - NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES, Continued

Financial Statement Presentation

The Organization's financial statements are presented in accordance with Statement of Financial Accounting Standards (SFAS) No. 117, "Financial Statements of Not-for-Profit Organizations." Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets and permanently restricted net assets. In addition, the Organization is required to present a statement of cash flows. As permitted by this statement, the Organization has discontinued its use of fund accounting and has, accordingly, reclassified its financial statements to present the three classes of net assets required. In 2007 and 2006 the Organization did not have any net assets that were classified as permanently restricted net assets.

Contributions

The Organization records contributions in accordance with SFAS No. 116 "Accounting for Contributions Received and Contributions Made." In accordance with SFAS No. 116, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence or nature of any donor restrictions.

Income Taxes

The Organization is a nonprofit organization exempt from taxes on income. Annual information returns are required to be filed with the federal government.